PREVENTIVE MEDICINE PROGRAM SELF-CHECK LIST FOR SURFPAC SHIPS

DATE:

1. C-Status grading system.

<u>C-Status:</u>	<u>Criterion:</u>
C-1	All seven sections received a SATISFACTORY (SAT) Score
C-2	One of seven sections received a NEEDS IMPROVEMENT (N), while all other sections received a SAT
C-3	Two or three sections received an N, while all other sections receive a SAT
C-4	Any section received an UNSATISFACTORY (UNSAT), or four or more sections received an N.

- 2. Checklist grading system.
 - a. Two or more UNSAT marks on any asterisked items renders that section UNSAT
 - b. Five or more N marks on any asterisked item renders that section UNSAT
 - c. Ten or more N's or five or five or more UNSAT marks (in items that are either asterisked or not asterisked), throughout a section renders that section UNSAT.

Note: The seven sections are:

Potable Water Sanitation

MSD

Habitability

Food Safety

Disease Surveillance, and

Pest Control

Medical Waste

ENVIRONMENTAL HEALTH SELF ASSESSMENT - CHECK LIST

DATI	E:		S – SATISFACTORY N – NEEDS IMPROVEMENT U – UNSATISFACTORY N/A – NOT APPLICABLE
Secti	on 1:	POTABLE WATER PROCEDURES	
Ref:	(b) (c) (d) (e)	COMNAVSURFPAC 6000.1H Shipboard Medic NAVMED P-5010 Manual of Preventive Medicine Naval Ship's Technical Manual 533, Potable Water Naval Ship's Technical Manual, CH-505, Piping Sy Naval Ship's Technical Manual, CH-670, General F Handling and Disposal of Hazardous General use C	e, Chapter 6 (Water Supply Afloat) r Systems (1995) systems (1999) Requirements for Stowage,
OVE	RALL	MARK:	
1. G	ENER	RAL	
—— water	a. sanitat	tion bill is published, to ensure procedures for receiptransfer, treatment, storage, distribution, and surve followed. Ref (a), Chap 5, Sec 3, 5302; Ref (b),	eillance are provided and
	b.	* There is a minimum trace halogen residual throught, Sec 3, 5303; Ref (b), Art 6-52.2; Ref (c), Art	
and M	c. ⁄ledical	the ship's water system operation, maintenance, ar (b), Art 6-2.6 and 6-2.7.	
	d.	The interior valve handwheels, operating levers, he caps are color-coded dark blue. (color chip 1504 7.8.2 and Table 505-7-1.	= = =
	e.	* The brominators are properly installed and mair	ntained. Ref (c), Sec 3.5 Art

2. FILLING STATIONS:

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	a.	Each filling station is clearly labeled with warning plates stating "POTABLE WATER ONLY" in one inch letters. Ref (a) Chap 5, Sec 3, 5303.c(1); Ref (c), Art 533-2.1.2.
	b.	Filling connections are at least 18 inches above the deck with receiving end turned down, and closed with screwcaps attached with keeper chains. Ref (a) Chap 5, Sec 3, 5303.c(1); Ref (b), Art 6-8.2; Ref (c), Art 533-2.1.2.
	c.	* The deck
riser ho	se con	nections and fittings are disinfected prior to hose hookup. Ref (b), Art 6-23.2; Ref (c), Art 533-3.5.2.3.
	d.	Warning labels are posted at each potable water hose connection in one inch red letters stating "DISONNECT HOSE WHEN NOT IN USE" in one inch red letters. Ref (c), Art 533-2.3.4.
3. PO	ΓABL	E WATER HOSES/HOSE LOCKERS:
	a.	The hose
lockers	are ve	ermin proof, locked, mounted 18 inches of the deck, out of the weather if possible, and labeled "POTABLE WATER HOSE". Ref (a) Chap 5, Sec 3, 5303.c(3); Ref (b), Art 6-20.1; Ref (c), Art 533-2.1.3.
	b.	Printed instructions outlining step-by-step methods for disinfection of hoses and risers are posted inside the lockers. Ref (a) Chap 5, Sec 3, 5303.c(3); Ref (b), Art 6-20.1; Ref (c), Art 533-2.1.3.
	c.	Potable water
hoses a	re mai	ked "POTABLE WATER ONLY" at 10 foot intervals, are well maintained, and are stored with the ends coupled or closed with screw type caps. Ref (a) Chap 5, Sec 3, 5303.c(2); Ref (b), Art 6-19.3; Ref (c), Art 533-2.1.3.
	d.	* Hoses are disinfected for two minutes prior to initial use, or after becoming contaminated, and flushed for 15-30 seconds prior to hook up. Ref (b), Art 6-23.2.
	e.	* Hoses are
used ex	clusiv	ely for potable water and are properly supported so they do not hang into the harbor water. Ref (b), Art 6-8; Ref (c), Art 533-2.1.1.

4. POTABLE WATER TANKS:

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a.	* Sounding
tubes shall b	be provided with valves or caps and with padlocks. The
	valve or cap shall be locked when not in use and properly labeled. Ref (b), Art 6-8.3; Ref (c), Art 533-2.3.6.
b.	Steel tapes or rods used as potable water sounding devices are color-coded dark blue or labeled "POTABLE WATER USE ONLY". Ref (a) Chap 5, Sec 3, 5303.d; Ref (b), Art 6-19.1.
c.	* Sounding
rods and/or	tapes are disinfected prior to use (tapes: immersion in 100
	ppm chlorine for two minutes, or wiped with a clean rag soaked in a disinfectant solution). Ref (b), Art 6-14.2.
d.	* The potable water air escape openings are covered with 18 mesh or finer non-corrosive metal screen, and do not terminate in foodservice spaces, medical spaces,
	heads, electrical spaces or weather decks. Ref (b), Art 6-12.
5. HALOO	GEN HANDLING AND SAFETY:
a.	* A potable
water hose v	with a quick opening valve is installed in the vicinity of each brominator. Ref (c), Art 533-3.4.6.
b	A warning plate, as specified in the Naval Ships Technical Manual CH 533, is installed at each brominator. Ref (c), Art 533-3.4.7 (Fig 533-3-2).
c.	Bromine cartridges shall be stored in clean, dry storerooms in sufficient quantities
	to store a 6- month supply, as calculated from the information in paragraph 533-3.5.1.2.12. Ready service lockers will have appropriate warning plates. Ref (b),
	6-21.1(5); Ref (c), Art 533- 3.4.5 (Fig. 533-3-1).
d.	* Suitable personnel protective gear for handling bromine or HTH spills are readily
	available, including neoprene gloves, coveralls, and goggles. Ref (e), Art 670-5.3.3.
e.	* The ready
usage stock	of calcium hypochlorite is not expired (is within two years
	of the manufacture date), is properly stowed in a locked, ventilated container, and
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	does not exceed a 7 day supply. Ref (b), Art 6-21.1(2); Ref (e), Art 670-5.5.3.1.
f.	* The stock storage of calcium hypochlorite is stowed in properly located lockers or bins with no more than 48 six ounce bottles per locker or bin. Ref (b), Art 6-21.1(3); Ref (e), Art 670-5.5.3.5.
g.	Storage lockers and bins for calcium hypochlorite are labeled with red letters on a white background "HAZARDOUS MATERIAL, CALCIUM HYPOCHLORITE". Ref (b), Art 6-21.1(4); Ref (e), Art 670-5.5.3.7.
6. RECOI	RDS AND TESTING:
a.	The Medical
department	maintains a potable water log, with appropriate entries as specified in the NAVMED P-5010-6. As a minimum: date/time, location (at sea, harbor, name of port), sampling site, source of ships water (water barge, distilling apparatus, shore water), halogen residual, bacteriological analysis. All testing will be documented using the SAMS environmental surveillance module. Ref (a), Chap 5, Sec 3, Art 5303.b; Ref (b), Art 6-54.
b.	A positive and negative control test are used to ensure the quality of the test procedure. No growth should result from the negative test and the positive control should demonstrate numerous typical coliform colonies. Ref (a), Chap 5, Sec 3, 5304.c.
c.	* The Medical
	is responsible for measuring potable water halogen residuals daily, while underway or deployed, or weekly while in port. Testing will be accomplished by monitoring a minimum of four sampling points that are representative of the ships distribution systems (i.e. forward, aft, mid-ships, and as far above the O-1 level as possible). Ref (a), Chap 5, Sec 3, Art 5303.b; Ref (b), Art 6-52.3; Ref (c), Art 533-4.3.2.
d.	The Medical Department is performing weekly bacteriological analysis of potable water samples. Samples will be collected from representative points throughout the
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distribution system (i.e. forward, mid-ships, aft, as far above the O-1 level as possible) as well as from the potable water tanks. In no case should less than four samples be taken weekly. to include 12 sites which are varied and represent all parts of the potable water distribution system, 1/4 of all potable water tanks, 1/4 of all ice machines. Ref (a), Chap 5, Sec 3, Art 5304.a; Ref (b), Art 6-53.3.

e.	* The Medical
Departmen	t procedures for performing halogen residual tests and
	bacteriological analysis of potable water are in accordance with Ref (b), Art 6-52 and 6-53.
f.	Medical Department is conducting monthly inspections of the potable water system. Ref (a), Chap5, Sec 3, 5301.
g.	* The Engineering department is performing required halogen residual testing. Ref (a), Chap 5, Sec 3, 5303.b; (b), Art 6-52.4; Ref (c), Art 533-4.3.3.
	(1) Daily on potable water tanks when in use.(2) Prior to receiving water on board.
	(3) A minimum of 30 minutes after initial halogenation has been accomplished.
	(4) As required when tanks are not in use to ensure minimum halogen residuals.
	(5) Prior to putting tanks in service.
	(6) In conjunction with weekly bacteriological testing, while hooked up to US operated shore source.
7. BATTL	E DRESSING STATIONS:
a.	* The
emergency	water tanks are drained and refilled quarterly with potable water
	containing at least a trace FAC or TBR. Ref (b), Art 6-32.2(a).
b.	An instruction plate is installed on each tank with the following inscription:
	"BATTLE DRESSING STATION TANK IS TO BE FLUSHED AND
	REPLENISHED WITH POTABLE WATER EVERY (3) THREE MONTHS".
	Ref (a), Chap 4, Sec 3, Art 4303c(6); Ref (b), 6-32.2a.
c.	*
Bacteriolog	rical tests of water from each emergency tank are conducted after

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32.2(c).

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filling and monthly thereafter. Ref (a), Chap 4, Sec 3, Art 4303.c(6); Ref (b), Art 6-

 d.	* Emergency 5-gallon potable water containers are labeled "WATER" on the exterior surface. Ref (b), Art 6-33.	
 e. n pota	* Emable water containers are emptied, flushed, and refilled quarterly with potable water containing at least a trace FAC or TBR. Ref (b),	ergency
	Art 6-33.9.	

^{*} These items are highly significant

DATE:	N U	- SATISFACTORY - NEEDS IMPROVEMENT - UNSATISFACTORY V/A – NOT APPLICABLE
Section 2:	2: MARINE SANITATION DEVICE (MSD)	
(b) (c) (d) (e) (f)	a) NAVSEAINST 9593.1B Certification Program for Sewage Devices (MSD) in the U.S. Navy Surface Ships and Craft b) Naval Ship's Technical Manual, CH-593 Pollution Control Naval Ship's Technical Manual, CH-505 Piping Systems d) NAVMED P-5010 Manual of Preventive Medicine, CH-7 Disposal Ashore and Afloat e) COMNAVSURFPACINST 6000.1H Shipboard Medical OPNAVINST 5100.19D NAVOSH Program Manual for CINCLANTFLT/CINCPACFLTINST 4790.3	Wastewater Treatment and Procedures Manual
TYPE OF	F SYSTEM USED:	
OVERAL	LL MARK:	
1. OPER	RATIONS AND MAINTENANCE:	
a.	* Ship's MSD system presently holds a full certification Vol IV, Part I, Chap 9, 9.2.	n. Ref (a), Para 5; Ref (i),
b.	* The MSD System is properly operated in accordance v Disposal Operational System" (SSDOS) and other author Ref (b), 593-4.2.1.1.	1 0
c.	. The MSD system and components are in good condition	on. Ref (a); Ref (b), Sec 4.
	(1) No parts of the system are leaking (no residual on piduring paper towel tests). Ref (d), 7-18.2.	ping, deck, drip pans, or
	(2) Properly labeled and color-coded equipment. Ref (d), 7-18.1.
d. Revised 1	the pump room, at the continuously manned remote location	-

		alarm is located, and at deck discharge connections. Ref (b), Art 593-4.3.5.
	e.	MSD system interior valve handles and operating levers are color-coded gold (chip 17043). Ref (d), 507g; Ref (c), 505-7.8.2.2 and Table 505-7-1.
	f.	While at sea, the CHT holding tanks shall be flushed and aerated once a week. The holding tanks shall be flushed for 30 minutes using the holding tank wash down system followed by 30 minutes of aeration. Ref (b), 593-4.6.1.6.3.d.
	g.	While in port, the CHT holding tanks shall be washed down for 30 minutes after tanks are pumped down (emptied). Ref (b), 593-4.6.1.6.2.a.4.
	h.	A ready stock of Sodium hypochlorite is on board and is properly stored (Pall-Trinity system only). Ref (a), Encl (6), Para II.B.5 & II.B.6.
	i.	* The potable water is separated from the fresh water (Jered Vacu-Burn system only). Ref (a), Encl (5), Para I.B.6.
	j.	* No fuel leaks are present (Jered Vacu-Burn system only). Ref (a), Encl (5), Para VII.B.4.
2. PE	RSON	AL PROTECTION AND SANITATION:
	a.	* Personal protective clothing and equipment are readily available, including coveralls, gloves, rubber boots, face shields, and hair covers and appropriate disinfectant, clean up and disposal supplies. Ref (a), Encl (3); Ref (b), Art 593-4.2.2.10 (a-l); Ref (d), Sec 3, Art 7-20; Ref (f) C1502.a.2.
	b.	* Fresh or salt water hose connections are provided to wash down pump room space; however if potable water is used, a vacuum breaker must exist in the line. Ref (a), Encl (3), Para IV.5; Ref (b), Art 593-4.2.2.8.
	c.	* Wash up facilities with potable water, soap, and hand drying fixtures are located in or near system pump rooms and other dedicated spaces. Ref (a), Encl (3), Para III.1; Ref (b) Art 593-4.2.2.7.
	d.	Personnel are thoroughly washing hands, lower arms, and face (in that order) with soap and water prior to smoking, eating, and drinking. Ref (f), C5102.a (3).
	e.	Health warning placards are posted in pump rooms and comminutor spaces. (i.e. wash thoroughly before leaving; no eating, drinking, or smoking; clean up
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		procedures, hydrogen sulfide rescue procedures; caution label plates at each pump controller). Ref (a), Encl (3), Para VII, Encl (5), Para I.B.9, Encl (6), Para II.A.2; Ref (b), Art 593-4.2.1.3.4 and 4.2.2.9; Ref (d), Sec 7-23 e and f; Ref (h) C1502.a (6); Ref (f), C1502.a.6.
	f.	Personnel are not smoking, eating, or drinking in pump rooms, comminutor spaces, or when working on CHT components. Ref (d), 7-22.2.e.
	g.	Deck discharge stations are painted the same color as the surrounding structure, clearly identified, and have appropriate sanitation and hose handling label plates. Ref (b), Art 593a; Ref (d), Art 507g; Ref (c), 505-7.8.2.4.
	h	Diverter valves are labeled "to overboard" or "to CHT tanks". Ref (a), Encl (3), Para XVIII.2d.
3. TR	AINI	NG AND RECORDS:
	a.	Indoctrination and annual health and safety training of MSD operators and maintainers is being done by the Medical Department. Ref (d), 7-21.2.b.
	b.	Basic immunizations (polio, tetanus, and diptheria) are current for personnel working with or exposed to sewage. Ref (d), 7-14.2.
	c.	Medical is conducting quarterly MSD system inspections. Ref (d), 7-21.2.a.
4. SA	FETY	; :
	a.	* Two EEBD's are located in each pump room. Ref (b), 593-4.2.1.1(5); Ref (d), Sec 3, Art 7-23.2.c; Ref (f), C1502.b (7).
	b.	* MSD rooms are configured with slightly negative pressure ventilation, to include powered air supply and exhaust ventilation in accordance with GENSPECS Sec 512. Exhaust ventilation ducts should extend to within 9 inches of the deck. Ref (d), Sec 3, Art 7-23.2.a.
	c.	* Removable drip pans are located in health sensitive areas (food storerooms, food preparation or messing areas, medical and dental spaces, spaces where leakage can reach bilges contacting potable water tank boundaries, berthing spaces when valves are located above or adjacent to bunks). Ref (a), Encl (3), Para XVIII 3; Ref (b), Art 593-4.2.2.6; Ref (f), C1502.a (4-5).
	d.	The Engineering Department inspects the MSD system components for leaks
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	regularly. All leaks, spills or other sources of contamination observed during the inspection or at any time must be promptly reported to the XO, CHENG, DCA and the SMO. Ref (b), 593-4.2.3.i; (d), Sec 3, 7-18.2 and 7-21.2(a); Ref (f), C1502.b (1).
 e.	* Appropriate (15 lb CO2) fire extinguishers are located in pump rooms. Ref (a), Encl (3), Para XX, Encl (5), Para I.b.4, Encl (6), Para II.a.11.
 f.	Fire/smoke detectors are installed and operational in incinerator spaces (Jared Vacus Burn system only). Ref (a), Encl (5), Para VII.B.2.

^{*} These items are highly significant

DATE	Ξ:	S – SATISH N – NEEDS	FACTORY S IMPROVEMENT
		U-UNSA	ΓISFACTORY
		N/A - NOT	APPLICABLE
Section	on 3:	3: HABITABILITY/HEADS & LIVING SPACES	
Ref:	(a)	a) NAVMED P-5010 Manual of Naval Preventive Medicine, CH-2	
	, ,	b) OPNAVINST 9640.1A Shipboard Habitability Program	
	` ′	c) COMNAVSURFPACINST 6000.1H, Shipboard Medical Procedure	es Manual
		d) Naval Ship's Technical Manual, CH-655 Laundry	
		Naval Ship's Technical Manual, CH-670 General Requirements for StOPNAVINST 5100.19D NAVOSH Program Manual for Forces Afl	•
		g) NAVMED P-5010 Manual of Naval Preventive Medicine, CH-1	Oat
	(5)	g) 1411 VIVILLE I 3010 IVICIII OI I VIIVIII I TEVENTIVE IVICII ETI I	
OVE	RALL	LL MARK:	
1. G	ENE	NERAL:	
	a.	* The SMO or his representative conducts routine sanitation inspe	ections of berthing
		areas, shower rooms, confinement facilities and gyms. The findings	•
		the CO with copies to the cognizant department heads, division office Ref (a), Art 2-9, 2-10, 2-18, 2-33, 2-46; Ref (c), Chap 5, Sec 4, 5	
2. BA	ARBI	BER SHOPS:	
	a.	a. The barbershop is clean and well maintained. Ref (a), Sec II, Art 2-	13.
	b.	b. Hair is promptly removed from the deck by a dustless method. Ref Art 2-15.	(a), Sec II,
	c.	* Sanitation regulations are conspicuously posted. Ref (a), Sec II, (c), Chap 5, Sec 4, 5402.	Art 2-18; Ref
	d.		
		from attending patrons when they are ill with a communicable diseas	e. Ref (a),
		Sec II, Art 2-12; Ref (c), Chap 5, Sec 4, 5402.	
	e.	e. There is an adequate supply of hot and cold running water and the	hot water
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		temperature is between 120°F-140°F. Ref (a), Sec II, Art 2-13.
	f.	There a sufficient supply of hand washing soap and paper towels available at each barber station. Ref (a), Sec II, Art 2-13.
	g.	The barbers wear clean smocks or freshly laundered over garments while attending patrons. Ref (a), Sec II, Art 2-12.
	h.	* Barbers wash their hands when required, including between patrons. Ref (a), Sec II, Art 2-12.
	i.	The barbers abstain from eating, drinking, or smoking while attending to patrons. Ref (a), Sec II, Art 2-15.
	j.	Clean, sanitary, covered receptacles are provided for waste material and used linen. Ref (a), Sec II, Art 2-15.
	k.	Covering cloths are clean and changed at least daily or more often when necessary. Ref (a), Sec II, Art 2-15.
	1.	Individual sanitary neck strips are used for each patron. Ref (a), Sec II, Art 2-15.
	m.	Disinfecting solutions are changed at least weekly or more frequently depending on patron load. Ref (a), Sec II, Art 2-16.
	n.	Removable and non-removable clipper heads are thoroughly cleaned and disinfected using an approved EPA spray. Ref (a), Sec II, Art 2-16.
	О.	Scissors, instruments, and combs are thoroughly washed with soap and water, then placed in a disinfecting solution or sprayed with an approved EPA disinfecting spray. Ref (a), Sec II, Art 2-16.
	p.	Chemically disinfected instruments are rinsed in running potable water before each use. Ref (a), Sec II, Art 2-16.
	q.	Common brushes and dusters are not used. Ref (a), Sec II, Art 2-16.
3. LA	UND	RY AND DRY CLEANERS:
	a.	* Pre-assignment and annual physicals are completed on personnel exposed to dry cleaning solvents. Ref (a), Sec IV, Art 2-32; Ref (c), Chap 5, Sec 4, 5403.
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 b.	Spaces are maintained in a clean and sanitary condition free of water, slip hazards and clutter. Ref (a), Sec IV, Art 2-33, 2-40; Ref (c), Chap 5, Sec 4, 5403.
 c.	Sanitation regulations are posted in all laundry spaces. Ref (c), Chap 5, Sec 4, 5403.
 d.	Covered containers are provided for trash. Ref (a), Sec IV, Art 2-33.
 e.	Separate areas are designated for clean and soiled laundry. Ref (a), Sec IV, Art 2-33.
 f.	Cooking, eating, smoking, and storage of food and drink is prohibited where laundry is handled. Ref (a), Sec IV, Art 2-33.
 g.	Frequent hand washing takes place, particularly after handling soiled laundry. Ref (a), Sect IV, Art 2-32.
 h.	A sanitary drinking fountain is provided in or near the laundry and dry cleaning plant. Ref (a), Sec IV, Art 2-33.
 i.	* Plumbing fixtures and equipment are maintained in good repair, free of cross connections, and kept in a sanitary condition. Ref (a), Sec IV, Art 2-33.
 j.	Lint screens are installed, in good condition, and are cleaned every four hours of operation or more frequently as needed. Ref (d), Art 655-1.10.7.18 and 1.10.7.19
 k.	Chlorine bleach is properly stowed in a clean, dry area away from sources of heat and moisture. Ref (e), Art 670-5.6.1.
 1.	* Dry cleaning fluids are stored in adequately vented storage spaces. Ref (e), Art 670-3.2.3.
 m.	* Appropriate eye protection (chemical goggles) is available where dry cleaning fluid, bleach, and detergent splashes may occur. Ref (a) Sec IV, Art 2-36.6.
 n.	A permanent emergency eye wash station is installed and properly maintained. Ref (a), Sec IV, Art 2-36.6; Ref (f), Art B0508.
 о.	* Automatic safety devices are functional and not bypassed. Ref (a), Sec IV, Art 2-36.7; Ref (d), Art 655-1.10.3.14, and 1.10.7.4.

- * Dry bulb thermometers are placed in laundry spaces. Thermometers are read p. while the ship is underway or when potential heat-stress conditions exist while in port. Ref (f), Art B0204b(3). (1) Every 4 hours for manned spaces if DB temperatures do not exceed 85°F. (2) Every hour for manned spaces if DB temperature exceeds 85°F. (3) Every hour at temporary installations where the DBN temperature exceeds 85°F during repair or maintenance operations. 4. BERTHING: Berthing spaces are clean and uncluttered. Ref (a), Sec I, Art 2-4. a. b. Mattresses, bedding and furniture are clean and in good repair. Ref (a), Sec I, Art 2-4. Polyurethane c. pillows are prohibited. Ref (a), Sec I, Art 2-4.3. Adequate lighting and ventilation are provided. Ref (a), Sec I, Art 2-4. d. The bowl, orifice, and mouth guard of scuttlebutts are clean and sanitary. Ref (a), e. Sec I, Art 2-66.4. **5. HEADS AND WASHROOMS:** * Urinals, water closets, lavatories and showers are clean and operable. Ref (a), Sec a. I. Art 2-4.5. b. Showers, curtains, mats, bulkheads, and decks are cleaned and sanitized at sufficient intervals to prevent mildew, odor, and soap accumulations. Ref (a), Sec I, Art 2-4.5. Handwashing facilities provide an adequate supply of tempered water. Ref (g), Art c. 5-7.2.b. Ample supplies of podered of liquid soap are provided in adequate dispensers. Ref d. (g), Art 5-7.2.e.
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(b), 3.4.4.

Paper towel dispensers are provided in each space. These may be augmented by electric hand dryers but not to the extent of exclusion of paper towel dispensers. Ref

6.	6. GYMNASIUMS:			
		a.	* Quarterly inspections are conducted by the Medical Department. Ref (a) Sect VII, 2-46; Ref (c) Chap 5, Sec 4, 5404.	
		b.	* Equipment is of acceptable design and maintained in safe operating condition. Ref (a) Sect VII, 2-47.	
		c.	Floors are maintained in a clean and safe condition. Ref (a) Sect VII, 2-48.	
		d.	Mats and other cushioning devices are adequately maintained and cleaned routinely. Ref (a) Sect VII, 2-50.	
		e.	Heads are maintained in a clean, sanitary manner with adequate soap, paper towels, and toilet tissue. Ref (a) Sect VII, 2-50.	
		f.	A sanitary drinking fountain is provided in or near gym spaces. Ref (a) Sect VII, 2-51.	
* 7	Γhes	e iten	ns are highly significant.	

DATE	:	S – SATISFACTORY N – NEEDS IMPROVEMEN U – UNSATISFACTORY N/A – NOT APPLICABLE	ΙΤ
Sectio	on 4:	FOOD SAFETY	
Ref:	(b) (c) (d) (e)	COMNAVSURFPACINST 6000.2H Shipboard Medical Procedures Manual NAVMED P-5010 Manual of Naval Preventive Medicine CH-1 (Food Service Sanitation) NAVSUPINST 4061.11G Standards of Food Service NAVSUP PUB 421 Food Service Operations NAVSUP PUB 486 Food Service Management NAVSUP PUB 520 Enlisted Dining Facility Master-At-Arms Handbook	
OVEF	RALL	_ MARK:	
1. GI	ENER	RAL:	
	a.	* Person In Charge is present at the food establishment during all hours of operation facilities categorized as risk type 3 or 4. Risk type 1 and 2 require on designated son in charge. Ref (b), Sec 2-1.1.	
	b.	* All food employees are medically screened for evidence of communicable disease prior to initial assignment in food service. Ref (a), Chap 5, Sec 2, 5201.d; Ref (b), 2-2.2.	
2. TF	RAIN	NING:	
	a.	* Persons In Charge (PIC) have attended the Food Safety Managers/Supervisors Course. Ref (b), Sec 2-1.2.2.A.	
	_ b.	Food safety training is performed by certified food safety instructors. Ref (a), Chap 5, Sec 2, 5202; Ref (b), 2-1.2.2.C.	
	c.	* All food service employees (employees assigned in excess of 30 days) receive a minimum of 4 hours initial food safety training. Ref (b), 2-1.2.2.B.a.	
		(1) New food service personnel shall receive 4 hour training within the first 30	

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http://www.spawar.navy.mil/usn/nepmu5/assets/images/ShipboardPMSelfInspChklist.PDF

days of employment.

	d.	(2) Additional 4 hours of annual training. Current Food Safety Training Certificates (NAMED 4061/1) for each food employee, supervisor, and person in charge is kept on file by the PIC, at the work location. Ref (b), 2-1.2.2.C.d.
	e.	* Temporary food service personnel assigned for 30 days or less receive 2 hours of initial training and orientation. Ref (b), 2-1.2.2.B.b.
3. FO	OD E	STABLISHMENT INSPECTION REPORTS:
	a.	Food establishments are inspected monthly, or at a frequency approved by the CO, but not less than quarterly. Ref (a), Chap 5, Sec 2, 5201.b; Ref (b), Section 6-1.1.
	b.	Food safety inspections are thorough and complete. Ref (a), Chap 5, Sec 2, 5201.a; Ref (b); Ref (c); Ref (d); Ref (f).
	c.	PMA's are verifying that critical violations have been corrected at the time of inspection or within 10 days of the initial routine inspection, and few repeat discrepancies are noted. Ref (a), Chap 5, Sec 2, 5201.b; Ref (b), NAVMED 6240/1 (Rev 12/97).
* Thes	se item:	s are highly significant.
Below	is a su	ummary of the Food Establishment Inspection Reports.
<u>Cı</u>	<u>ritical</u>	Non Critical Food Service Establishment
a		Enlisted Galley and Mess
b		CPO Galley and Mess
c		Wardroom Galley and Mess

d Flag	Galley and Mess
Attached are the Food Establishment Inspec	tion Reports(6240/1).

DATE:	S – SATISFACTORY
	N – NEEDS IMPROVEMENT
	U-UNSATISFACTORY
	N/A – NOT APPLICABLE

Section 5: DISEASE PREVENTION

Ref: (a) COMNAVSURFPACINST 6000.1H Shipboard Medical Procedures Manual

- (b) BUMEDNOTE 6230 Immunization Requirements and Recommendations
- (c) NAVMEDCOMINST 6224.8 Tuberculosis Control Program
- (d) BUMEDINST 6222.10A Sexually Transmitted Disease (STD) Clinical Management Guidelines
- (e) CDC 1998 Guidelines for Treatment of Sexually Transmitted Diseases
- (f) SECNAVINST 5300.30C Management of Human Immunodeficiency Virus (HIV) Infection in the Navy and Marine Corps Screening Program Update
- (g) NAVMEDCOMINST 6230.1A Viral Hepatitis Prevention
- (h) BUMED MSG 242140Z MAY 96 Updated Guidance on use of Newly Licensed Hepatitis A Vaccine
- (h) NEHC TM6250.98 Navy Medical Department Pocket Guide to Malaria Prevention and Control
- (i) NAVMEDCOMINST 6230.2A Malaria Control and Prevention
- (k) NAVMEDCOMINST 6220.4 Rabies Prevention and Control
- (1) NAVMED P-5038 Control of Communicable Disease Manual 16th Ed., 1995
- (m) NAVMEDCOMINST 6220.12A Medical Event Reports
- (n) SECNAVINST 6230.4 Department of the Navy (DON) Anthrax Vaccination Implementation Program (AVIP)

OVER	ALL	MARK:
1. HE	ALTI	H CARE SYSTEM
	a.	A health care monitoring system exists for TB, STD's, and Immunizations. Ref (a), Chap 5, Sec 6, 5601.
	b.	All required references are on board. Ref (a), Chap 5, Sec 6, 5601. (1) Immunizations Ref (b). (2) Tuberculosis Ref (c). (3) Sexually Transmitted Disease Ref (d-f). (4) Human Immunodeficiency Virus Infection Ref (f).

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- (5) Hepatitis Ref (g and h).
- (6) Malaria Ref (i and j).
- (7) Rabies Ref (k).
- (8) Food-borne Illness/Infection Ref (l).
- (9) Disease Surveillance Ref (m).

2. IMMUNIZATION PROGRAM

	a.	* Immunizations are current (Typhoid, Tetanus, Yellow Fever, Influenza, Hepatitis A, and Anthrax). For readiness assessment purposes, the status of the crew for each immunization must be greater than 90% to be graded satisfactory. Ref (a), Chap 5, Sec 6, 5606; Ref (b).
	b.	Health record entries are accurate and complete. Ref (b), 3.i.
	c.	* Medical/Dental personnel have documentation of measles, mumps and rubella (MMR) immunization or positive immune status. Ref (a), Chap 5, Sec 6, 5606.b; Ref (b), 6.g.
	d.	SAMS database system is utilized for tracking and reporting all routine immunizations IAW SECNAVINST 6230.4. IN addition ships utilize Shipboard Non-Tactical Automated Data Processing Program (SNAP) Automated Medical System (SAMS) for tracking, documenting, and submitting immunization compliance data up the chain of command. Ref (b), 2.h.(1)(a).
	e.	Electronic transfer of all immunization data is required monthly (weekly for anthrax) to the Naval Medical Information Management Center (NMIMC). SAMS data may be submitted via floppy disk if electronic transfer is not possible. Ref (b), 2.h(2); Ref (n).
3. TU	BERG	CULOSIS PROGRAM
	a.	PPDs are given and read in a timely manner. Ref (c), Encl (1), 6b(3)(a).
	b.	* New reactors receive a baseline X-ray and liver function tests. Ref (c), Encl (1), 5b(2) and (3).
	c.	* New reactors receive a baseline HIV screening test. Ref (c), Encl (2), 5b(4).
	d.	INH chemoprophylaxis start and complete dates are documented. Ref (c), Encl (2), 8.
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	e. f.	* Reactors receive an annual/monthly clinical TB screening evaluation. For readiness assessment purposes, PPD/Converter evaluation must be 100% to be graded satisfactory. Ref (a), Chap 5, Sec 6, 5603; Ref (c), Encl (4), Para 2 and 3. * The Annual Tuberculosis Summary record has been completed and maintained on file for at least three years with a copy to NEPMU-5. Ref (c), Encl 4.
4. SE	XUA	LLY TRANSMITTED DISEASES
	a.	Personnel are familiar with current sexually transmitted disease treatment regimens. Ref (e).
	b.	* Baseline RPR\VDRL and HIV testing is conducted on all STD patients. Ref (d), 4a and b; Ref (f) 6e.
	c.	Follow-up RPR's are conducted when symptoms of syphilis or positive RPR's are found. Ref (d), 1b.
	d.	* Personnel diagnosed with an STD receive a Hepatitis B Vaccine series (3 doses) with proper documentation in the Health Record. Ref (d), 4c.
	e.	All relevant STD data is recorded in the patient's health record, STD log and/or SAMS system. Ref (m).
	f.	Contact interviews are conducted, recorded, and the CDC form forwarded to the appropriate public health department. Ref (d), 7; Ref (m).
5. GI	ENER	AL PREVENTIVE MEDICINE
	a.	MALARIA
		(1) Personnel are familiar with the sources of current information on malaria prevention and control measures. Ref (j) and Ref (i).
		(2) G6PD testing is complete on all personnel. Ref (i), Chap 5, p. 55.
		(3) Prior to deployment, all units schedule a pre-deployment briefing with the cognizant NEPMU far enough in advance of deployment to allow for procurement of recommended chemoprophylactic agents. Ref (a), Chap 5, Sec 6, 5606.d.

	(4) For forward-deployed ships, annual Malaria training (preparation and reading of malarial smears) is conducted for medical personnel. Ref (a), Chap 5, Sec 6, 5605.d.
b.	RABIES
	(1) Personnel are knowledgeable in rabies prevention practices and treatment. Ref (l).
c.	MEDICAL EVENT REPORTS
	(1) Medical Event Reports (MERs) are submitted as required. Ref (m).
d.	* HIV
	(1) Annual HIV testing is conducted annually for all shipboard personnel. For readiness assessment purposes, the status of crew testing must be greater than 90% to be satisfactory. Ref (a), Chap 5, Sec 6, 5607; Ref (f), Para 6
	(2) HIV test results are recorded on the appropriate form (NAVMED 6000/2) in the Health Record. Ref (f), Para 6f.
e.	* HEPATITIS
	(1) Personnel are familiar with Navy policy for preventing viral hepatitis infection. Ref (g), Para 4b, Page 2.
	(2) Medical and Dental personnel received their Hepatitis B immunizations. For readiness assessment purposes, Hepatitis B must be at 100% or these personnel to be graded satisfactory. Ref (a), Chap 5, Sec 6, 5604; Ref (b), 6.d.(c).
* These iter	ns are highly significant.

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DATE	E:	S – SATISFACTORY N – NEEDS IMPROVEMEN U – UNSATISFACTORY N/A – NOT APPLICABLE	Т
Sectio	on 6:	ENTOMOLOGY - PEST CONTROL & PESTICIDE SAFETY	
Ref:	(a) (b) (c) (d)	Forces OPNAVINST 6250.4B Pest Management Programs	
	(e) (f) (g)	NAVMED P-5010 Manual of Preventive Medicine, Chapter 8 BUMEDINST 6250.12C Pesticide Applicator Testing and Certification for Medical Personnel	
	(h) (i) (j)	BUMEDINST 6250.14A Procurement of Deratting/Deratting Exemption Certificate OPNAVINST 5100.19D Navy Occupational Safety and Health Program Manual for Forces Afloat (NAVOSH) Naval Ships Technical Manual CH-670 Stowage, Handling, and Disposal of	

- Hazardous General Use Consumables
 (k) NAVSUPPUB 421 Foodservice Operations
- (l) NAVSEA MANUAL 0964-000-2000 Lighting on Naval Ships, Chapter 8
- (m) Navy-Wide Shipboard Pest Control Manual (DVECC Pub)
- (n) Armed Forces Pest Management Board Technical Information Memorandum No. 38

OVERALL MARK:		
1. ADMINISTRATION:		
a.	All required references and relevant Material Safety Data Sheets (MSDS) are on board. Ref (i) Para B0302d.	

- (1) Quarantine Regulations of the Armed Forces. Ref (b).
- (2) Pest Management Programs. Ref (c).
- (3) Medical Entomology and Pest Control Technology. Ref (f).
- (4) Navy-Wide Shipboard Control Manual. Ref (m).
- (5) Pesticide Applicator Training and Certification for Medical Personnel. Ref (g).

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		(6) Procurement of Deratting/Deratting Exemption Certificates. Ref (h).(7) Protecting Meals Ready to Eat (MREs). Ref (n).
	b.	PMT's maintain current category 8 Pest Control certification. Ref(g), p.2, 5.a.
	c.	* The corpsmen responsible for the pest control program and the senior enlisted medical department representative are currently certified in shipboard pest control. Ref (a), Chap 5, Sec 5, 5501.b; Ref (f), Chap 8, Sec I, 8-6(1).
	d.	* Personnel using respirators have had a medical evaluation, fit testing, and received proper training. Ref (m), Chap 5.
	e.	* Annual Cholinesterase testing is done on all personnel working with organophosphate and carbamate pesticides. Ref (m), Chapter 5.
	f.	All pest control surveys, inspections and operations are properly recorded and documented using the SAMS environmental surveillance module. Ref (a), Chap 5, Sec 5, 5501.e.; Ref (m), Chap 4.
	g.	* The ship has a current USPHS Deratization Exemption. Ref (a), Chap 5, Sec 5, 5502.b; Ref (d), pg 10-9, 10304.2; Ref (e), Chap 22, Sec X, Para 22-37.
2. PE	ST C	ONTROL MEASURES
	a.	Cockroach surveys are properly performed. Ref (f), Sec VI, Para 8-38(4)(e).
	b.	* Pesticides are properly applied. Ref (f), Chap 8, Sec II; Ref (m) Chap 5 and 6.
	c.	Approved rat guards are properly placed on all ship to shore lines. Ref (d), pg 10-10, Para 10311.b; Ref (h), Encl (2), pg 1-2, Para 1-3.
	d.	The ship is free of cockroach infestations. Ref (f), Sec VI, Para 8-38(4)(e).
3. PE	ST C	ONTROL EQUIPMENT AND MAINTENANCE
	a.	* NIOSH approved respirators are properly maintained and stored. Ref (m), Chap 5; Ref (i), Chap B6, Para B0609.
		(1) Inspected before and after each use.
		(2) Cleaned and sanitized according to manufacturer's instructions of per Ref (i), B0609b.

		and connections in good condition. Unused cartridges are not expired and do not have evidence of prior use (sealed with manufacturer's original tape, foil, etc.).
		(4) Stored flat in a clean, dry, uncontaminated area without crowding which may distort the respirator face piece, and stored in clean plastic bag or other sealed container.
	b	An approved pesticide sprayer is on board and in good repair. Ref (m), Chap 6.
	c.	Spare parts are available for sprayer maintenance. Ref (m), Chap 6.
4. SA	FETY	Z EQUIPMENT
	a.	* Approved replacement combination cartridges or cartridges with pre-filters are on board. Ref (f), Sec IV, Para 8-21(2); Ref (i), Chap B6, Para B0604.a(4) and Appendix B6-D.
	b.	* Approved solvent resistant gloves are on board. Ref (f), Sec IV, 8-21(6); Ref (i), Chap B12, Para B1203.c(3); Ref (j), 670-1.8; Ref (m), Chap 5.
	c.	* Separate coveralls are used exclusively for pest control. Ref (f), Sec IV, 8-21(4)(c); Ref (j), 670-1.8; Ref (m), Chap 5.
	d.	* Approved chemical goggles are on board. Ref (f), Sec IV, 8-21(3); Ref (i), Chap B12, Para B12; Ref (j), 670-1.8; Ref (m), Chap 5.
	e.	* Pesticide supplies are properly stored in a flammable storage locker. Ref (j); Ref (m), Chap 5.
	f.	* An approved and properly labeled pesticide spill kit is on board. Ref (f), Sec IV, Para 8-23; Ref (j), 670-1.7 through 1.10; Ref (m), Chap 5.
		 (1) Labeled "FOR PESTICIDE SPILLS ONLY" (2) 5 to 10 pound bag of absorbent material. (3) PPE (4) Dustpan (5) Brushes (dusting and scrub for detergent) (6) Plastic bags (7) Hazardous Waste Labels

(3) Cartridges/filters: Proper cartridge and installation, gaskets/threadings

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(8) Liquid Detergent

5. SUPPLY STOREROOMS * Inspections of dry storerooms are properly performed. Ref (f), Chap 1, 3-4.4.c. a. Items infested with stored product pests are isolated or disposed of properly. Ref b. (f), Chap 1, Sec 3, 3-1.2.6. Inspections of pierside stores are properly performed. Ref (f), Chap 1, Sec 3, 3-1.3. c. d. Dry stores are maintained in a clean and sanitary manner with no evidence of food spillage. Ref (f), Chap 1, Sec 3, 3-4.1. Gratings and pallets are used properly to promote good air circulation. Ref (f), e. Chap 1, Sec 3, 3-4.1. f. Storeroom bulkheads are lightly colored and made of easily cleanable material. Ref (k), Chap 2, Sec 2009.2. Lighting in dry storerooms adequate and functioning. Ref (k), Chap 2, Sec 2009.3; g. Ref (1), Table 8-2. Spoiled food items are absent from the dry storerooms. Ref (f), Chap 1, Sec 3, 3h. 1.2.1; Ref (k), Chap 1, Sec 1000-1008. i. Items are properly stacked for rotation "First in, first out". Ref (f), Chap 1, Sec 3, 3-4.6. Outdated food items extended by Army Veterinary Service when possible. Ref (f), j. Chap 1, Sec 3, 3-4.4; Ref (k), Chap 2, Sec 2009. k. * The ship is free of rodent infestation. Ref (f), Chap 8, Sec VI, 8-44(5); Ref (k), Chap 1, Sec 1005, Chap 2, Sec 2008. 6. MEAL, READY-TO-EAT RATIONS (MREs) MREs are rotated every deployment. MREs have a 3 year shelf life under normal a. conditions. Rotation will return MREs to supply channels for reissuing and consumption. Revised 11/01

	Ref (n), Part II, 2.D.
 b.	MREs are stacked no more than three pallets (preferably two) high to avoid crushing the cases at the base of the stack. Ref (n), Part II, 4.A.
 c.	MREs can be expected to experience temperature ranges that allow them to last for at least one year. However, temperature storage guidelines state for MREs: seven years at 60°F, five years at 70°F, four years at 80°F, thirty months at 90°F, and five months at 110°F. Ref (n), Part II, 4.C.
 d.	Receipt inspection of MREs are being conducted prior to loading onto ships. Only MREs in good condition and free of defects and infestations should be accepted. Ref (n), Part I, 9.D, and Part II, 5.B.
 e.	* MREs are not stacked over, or immediately adjacent to, petroleum products (oils, grease, fuels, or solvents). Ref (n), Part II, 4.C.
 f.	A high degree of sanitation is maintained in MRE stowage areas. Ref (n), Part II, 5.A.

^{*} These items are highly significant.

DATE	Ξ:	N-1 $U-U$	ATISFACTORY NEEDS IMPROVEMENT JNSATISFACTORY – NOT APPLICABLE
Section	on 7:	: MEDICAL WASTE	
Ref:	(b)	COMNAVSURFPACINST 6000.1H Shipboard Medical Pro OPNAV P-45-113-3-99 Afloat Medical Waste Guide OPNAVINST 5090.1B Environmental and Natural Resources	
OVE	RALL	L MARK:	
1. Al	DMIN	INISTRATION:	
	a.	 Exposure control plan contains the following information. Identifies those at risk of exposure. Lists typical tasks involving potential infectious medical was identifies control measures to prevent or minimize exposure. Lists post-exposure evaluation and follow up procedures. Addresses communication of hazards to employees. Lists record keeping procedures. 	te exposures and
	b.	Personnel injured while handling infectious waste immediately area with soapy water if possible. Ref (b), IV.A.3.	wash the injured
	c.	* Personnel handling infectious medical waste wear gloves and medical clothing and PPE appropriate to the level of risk they eand PPE are removed prior to leaving the work area and place or container until it can be properly laundered, decontaminated (b), IV.A.4.	encounter. Clothing ed in a designated area
	d.	* Personnel are not eating, drinking, or smoking while handling medical infectious waste. Ref (b), IV.A.6.	g or being exposed to
	e.	The following safety precautions are used when handling shared (c), 19-8.3.e.Sharps are discarded into rigid, puncture resistant, autoclay that are labeled or color-coded.	•

2. Needles are not clipped, cut, bent, or recapped.3. Sharps containers are closed when they are ¾ full.

		4. Sharps are retained in proper containers on board for proper disposal ashore after autoclaving. Place sharps containers in a second container (plastic bag or rigid box) which is labeled or color-coded. Closed containers are collected and carefully transported to the treatment or storage site ashore.
	f.	Personnel treat all human blood and certain human body fluids as if known to be infectious (Universal Precautions). Ref (b), IV.A.11.
2. SP	ILL	PROCEDURES:
	a.	* Spill kit is located within the vicinity of sickbay (absorbent material, hospital grade disinfectant, biohazard bags, fluid resistant disposable overalls, gloves, boots, caps, protective face shield/mask, and tape for sealing wrists and ankles. Ref (b), IV.B.1.
	b.	* Senior medical representative appropriately documents all spill incidents in the ship's medical log, including the date, time, location, and quantity of spilled material. Ref (b), IV.B.8.
	c.	Personnel immediately report all exposure incidents that occur as the result of a spill or mishap cleanup to the responsible supervisor. The SMR assesses the risk of infection and appropriate medical follow-up action that may include booster shots. Ref (b), IV.A.3.
3. PA	CKA	AGING:
	a.	* Infectious medical waste containers are labeled "BIOHAZARD". If standard preprinted biohazard bags or labels are not available, red containers marked with the universal biohazard symbol or the word "BIOHAZARD" are used. Ref (b), IV.C.1.
	b.	Infectious medical waste is double bagged in biohzard bags, autoclated (underway) if ossible, and stored in a secure area until disposed ashore. Ref (a), Chap 3, Sec 3117, b(1).
	c.	Sealed bags should be clearly marked and shall identify the generator, date of generation, and contents. Wet or leaking bags are double-bagged. Ref (b), IV.C.3.
	d.	* Infectious medical waste containers are covered and sealed before and during transport to treatment and storage areas. Rigid or semi-rigid, leak-proof containers are used to transport infectious medical waste. Ref (b), IV, C.4.
—— Revise	e. ed 11.	Anatomical pathology waste is placed into a double wall corrugated box or

equivalent rigid container that is double lined with plastic bags for storage, transport and incineration, cremation, or burial by a licensed mortician. Ref (b), IV.C.5.

4. ST	ORA	GE:
	a.	Infectious waste is stored separately from all other hazardous materials. Ref (b), IV.E1.
	b.	* Infectious medical waste is stored in suitably marked containers in a designated storage area located near the sickbay but away from patient care, berthing or food service areas. Ref (b), IV.E.2.
		1. Not stored in refrigerators, freezers, or other storage areas with medications, food or supplies.
		2. Storage areas are clean.3. Universal biohazard symbol and the word "BIOHAZARD" is clearly visible on the outside of the storage area.
		 Access is limited to authorized personnel specifically designated to handle infectious medical waste.
	c.	Storage time of untreated infectious medical waste (with no refrigeration capability) is kept to a minimum, not to exceed four days. Ref (b), IV.E.3.
	d.	Used sharps will be collected in autoclavable sharps containers and retained on board for disposal ashore. To avoid creating potentially infectious aerosols, needles will not be clipped. Similarly, to avoid the infection hazard of needle sticks, needles should not be recapped. Ref (a), Chap 3, Sec 3117, b.(3).
5. DI	SPOS	SAL:
	a.	In port, medical waste is delivered to a designated Navy Branch Medical Clinic or turned over to an authorized PWC contractor. Ref (b), IV.F.2.
	b.	Sharps containers are placed in a separate container from other waste (either a puncture resistant container or impervious plastic bag). Ref (b), IV.F.2.
	c.	Blood, blood products, and other liquid infectious medical wastes may be discharged into the marine sanitation device, preferably through a laboratory sink. One sink is designated and labeled with a placard warning users to only dispose of blood, blood products, and liquid infectious waste when the ship is greater than 50 nautical miles

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		from shore. Ref (b), IV.F.3; Ref (c), 19-8.3.i.
	d.	If retention of potentially infectious waste would endanger the health or safety of the crew, create an unacceptable nuisance, or compromise combat readiness, overboard discharge is authorized beyond 50 miles form any shoreline, provided it has been autoclaved, properly package, weighted rfor negative buoyancy and contains no plastic or sharps. Such disposal will be approved by the CO and a deck log entry made indicating number of bags/containers, time and position of the ship a the time of overboard disposal. Ref (a), Chap 3, Sec 3117, b (6).
6. TRA	AIN	ING:
	a.	* Personnel working with infectious medical waste or material contaminated with infectious waste receive annual training on all aspects of handling infectious medical waste to ensure they know how to protect themselves. Ref (b), IV.H.
	b.	* Newly assigned personnel review exposure control plan for training purposes. Ref (b), IV.A.1.
7. REC	COF	RD KEEPING:
	a. IV.l	* Medical is keeping an accurate Infectious Waste Log Book that contains the following information: date, type of waste, amount (volume or weight), storage location, and method of disposal. Ref (a), Chap 3, Sec 3317, b(8), 16306.f.; Ref (b), Ref (c), 19-8.3.h.
* These	e iter	ms are highly significant.